

United States Bankruptcy Court for the:

**Northern District of Illinois**Case number (*If known*): \_\_\_\_\_ Chapter you are filing under:

- Chapter 7  
 Chapter 11  
 Chapter 12  
 Chapter 13

Check if this is an amended filing

**Official Form 101****Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Identify Yourself****About Debtor 1:****1. Your full name**

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

**Robert**

First name

Middle name

**Webber**

Last name

Suffix (Sr., Jr, II, III)

**About Debtor 2 (Spouse Only in a Joint Case):****Patricia**

First name

Middle name

**Webber**

Last name

Suffix (Sr., Jr, II, III)

**2. All other names you have used in the last 8 years**

Include your married or maiden names.

First name

Middle name

Last name

First name

Middle name

Last name

First name

First name

Middle name

Middle name

Last name

Last name

**3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)**xxx - xx - 8 2 3 6

OR

9xx - xx - \_\_\_\_ - \_\_\_\_ - \_\_\_\_

xxx - xx - 7 6 1 1

OR

9xx - xx - \_\_\_\_ - \_\_\_\_ - \_\_\_\_

**About Debtor 1:****4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years**

Include trade names and *doing business as* names

I have not used any business names or EINs.

Business name

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Business name

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EIN

---

EIN

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**About Debtor 2 (Spouse Only in a Joint Case):**

I have not used any business names or EINs.

Business name

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Business name

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EIN

---

EIN

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**5. Where you live****1008 Landon Ave**

Number      Street

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**Winthrop Hbr, IL 60096-1734**

City                  State                  ZIP Code

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**Lake**

County

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If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number      Street

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P.O. Box

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City                  State                  ZIP Code

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**If Debtor 2 lives at a different address:**

Number      Street

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City                  State                  ZIP Code

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County

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If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number      Street

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P.O. Box

---

City                  State                  ZIP Code

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**6. Why you are choosing this district to file for bankruptcy****Check one:**

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

I have another reason. Explain.  
(See 28 U.S.C. § 1408)

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**Check one:**

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

I have another reason. Explain.  
(See 28 U.S.C. § 1408)

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## Part 2: Tell the Court About Your Bankruptcy Case

7. The chapter of the Bankruptcy Code you are choosing to file under

*Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form B2010)). Also, go to the top of page 1 and check the appropriate box.*

- Chapter 7
  - Chapter 11
  - Chapter 12
  - Chapter 13

#### **8. How you will pay the fee**

**I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.

- I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay Your Filing Fee in Installments* (Official Form 103A).
  - I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

9. Have you filed for bankruptcy within the last 8 years?

No.

Yes. District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY

District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY

District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

No.

<input type="checkbox"/> Yes.	Debtor _____	Relationship to you _____
District _____	When _____	Case number, if known _____
	MM / DD / YYYY	
Debtor _____	Relationship to you _____	
District _____	When _____	Case number, if known _____
	MM / DD / YYYY	

**11. Do you rent your residence?**

No. Go to line 12.

- Yes. Has your landlord obtained an eviction judgment against you?

No. Go to line 12.

Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

Part 3: Report About Any Businesses You Own as a Sole Proprietor

**12. Are you a sole proprietor of any full- or part-time business?**

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

No. Go to Part 4.

Yes. Name and location of business

Name of business, if any

Number Street

City

State

ZIP Code

*Check the appropriate box to describe your business:*

- Health Care Business (as defined in 11 U.S.C. § 101(27A))  
 Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  
 Stockbroker (as defined in 11 U.S.C. § 101(53A))  
 Commodity Broker (as defined in 11 U.S.C. § 101(6))  
 None of the above

**13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?**

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

No. I am not filing under Chapter 11.

No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

**14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**

*For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?*

No.

Yes. What is the hazard? \_\_\_\_\_

If immediate attention is needed, why is it needed? \_\_\_\_\_

Where is the property?

Number Street

City

State

ZIP Code

## Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

**About Debtor 1:***You must check one:*

I received a briefing from an approved credit counseling agency within the 180 before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

**Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

**Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

**Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

**About Debtor 2 (Spouse Only in a Joint Case):***You must check one:*

I received a briefing from an approved credit counseling agency within the 180 before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

**Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

**Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

**Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Part 6: Answer These Questions for Reporting Purposes

<b>16. What kind of debts do you have?</b>	<b>16a. Are your debts primarily consumer debts?</b> Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."		
	<input type="checkbox"/> No. Go to line 16b. <input checked="" type="checkbox"/> Yes. Go to line 17.		
	<b>16b. Are your debts primarily business debts?</b> Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.		
	<input type="checkbox"/> No. Go to line 16c. <input type="checkbox"/> Yes. Go to line 17.		
	<b>16c. State the type of debts you owe that are not consumer debts or business debts.</b> <hr/>		
<b>17. Are you filing under Chapter 7?</b>			
<b>Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?</b>	<input type="checkbox"/> No. I am not filing under Chapter 7. Go to line 18.  <input checked="" type="checkbox"/> Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?		
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<b>18. How many creditors do you estimate that you owe?</b>			
	<input checked="" type="checkbox"/> 1-49	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 25,001-50,000
	<input type="checkbox"/> 50-99	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 50,000-100,000
	<input type="checkbox"/> 100-199	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> More than 100,000
	<input type="checkbox"/> 200-999		
<b>19. How much do you estimate your assets to be worth?</b>			
	<input checked="" type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
	<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
	<input type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
	<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion
<b>20. How much do you estimate your liabilities to be?</b>			
	<input type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
	<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
	<input checked="" type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
	<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

Part 7: Sign Below

**For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**X** /s/ Robert Webber  
 Robert Webber, Debtor 1  
 Executed on 07/03/2018  
 MM/ DD/ YYYY

**X** /s/ Patricia Webber  
 Patricia Webber, Debtor 2  
 Executed on 07/03/2018  
 MM/ DD/ YYYY

First Name Middle Name Last Name

**For your attorney, if you are represented by one**

**If you are not represented by an attorney, you do not need to file this page.**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

X

/s/ Tina Adams

Tina Adams, Attorney

Date 07/03/2018

MM / DD / YYYY

**Tina Adams**

Printed name

**Robert J. Adams & Associates**

Firm name

**111 N. County**

Number Street

**Waukegan**

City

**IL**

State **60085**

ZIP Code

Contact phone (847) 223-5500

Email address tinaadams.rja@gmail.com

Bar number

State

Debtor 1	<b>Robert</b>	<b>Webber</b>	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Patricia</b>	<b>Webber</b>	
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>Northern District of Illinois</b>		
Case number			

Check if this is an amended filing

## Official Form 106A/B

### Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

##### 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.

Yes. Where is the property?

1.1 **1008 Landon Ave, Winthrop Harbor, IL 60096-1734**

Street address, if available, or other description

**1008 Landon Ave**

**Winthrop Hbr, IL 60096-1734**

City State ZIP Code

**Lake**

County

**What is the property?** Check all that apply.

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

**Current value of the entire property?**

unknown

**Current value of the portion you own?**

unknown

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

**Homestead**

Check if this is community property  
(see instructions)

##### 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....

→ **\$0.00**

## Part 2: Describe Your Vehicles

**Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.**

## 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

No  
 Yes

## 3.1 Make:

Hyundai

## Who has an interest in the property? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

## Model:

Elantra

## Year:

2013

## Approximate mileage:

105000

## Other information:

2013 Hyundai Elantra (approx. 105000 miles)

Check if this is community property (see instructions)

Current value of the entire property?

\$7,100.00

Current value of the portion you own?

\$7,100.00

## 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

No  
 Yes

## 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....

→ \$7,100.00

## Part 3: Describe Your Personal and Household Items

**Do you own or have any legal or equitable interest in any of the following items?**

**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

## 6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

No  
 Yes. Describe.....

5 Rooms of furnishings, Newer Couch and Loveseat, one chair, dining and cookware, linens and misc household goods

\$1,500.00

## 7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

No  
 Yes. Describe.....

1 Smart TV 32inch, 1 regular 36 inch TV, Desk Top Computer, pad, 2 Cell Phones, Lights, Appliances came with the house, smaller appliances

\$1,200.00

## 8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

No  
 Yes. Describe.....

[Redacted]

[Redacted]

**9. Equipment for sports and hobbies**

*Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

- No  
 Yes. Describe.....

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**10. Firearms**

*Examples:* Pistols, rifles, shotguns, ammunition, and related equipment

- No  
 Yes. Describe.....

--	--

**11. Clothes**

*Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories

- No  
 Yes. Describe.....

Normal Clothing	\$400.00
-----------------	----------

**12. Jewelry**

*Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

- No  
 Yes. Describe.....

2 Wedding Rings, 2 Watches, One gold necklace	\$1,500.00
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**13. Non-farm animals**

*Examples:* Dogs, cats, birds, horses

- No  
 Yes. Describe.....

--	--

**14. Any other personal and household items you did not already list, including any health aids you did not list**

- No  
 Yes. Describe.....

--	--

**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached**

for Part 3. Write that number here →

\$4,600.00

**Part 4: Describe Your Financial Assets**

**Do you own or have any legal or equitable interest in any of the following?**

**Current value of the portion you own?  
 Do not deduct secured claims or exemptions.**

**16. Cash**

*Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

- No  
 Yes.....

Cash.....

\$10.00

**17. Deposits of money**

*Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

No  
 Yes.....

Institution name:

17.1. Checking account:	<u>JP Morgan Chase</u>	<u>\$6.00</u>
17.2. Checking account:	<u>Chase</u>	<u>\$50.00</u>
17.3. Savings account:	<u>Chase</u>	<u>\$1.00</u>
17.4. Savings account:	<u>Chase</u>	<u>\$134.00</u>
17.5. Certificates of deposit:		
17.6. Other financial account:	<u>Great Lake Credit Union</u>	<u>\$7.00</u>
17.7. Other financial account:		
17.8. Other financial account:		
17.9. Other financial account:		

**18. Bonds, mutual funds, or publicly traded stocks**

*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts

No  
 Yes.....

**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**

No  
 Yes. Give specific information about them.....

**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.

*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

No  
 Yes. Give specific information about them.....

**21. Retirement or pension accounts**

*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

No  
 Yes. List each account separately.

22. **Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

- No  
 Yes.....

23. **Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)

- No  
 Yes.....

24. **Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

- No  
 Yes.....

25. **Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

- No  
 Yes. Give specific information about them....

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26. **Patents, copyrights, trademarks, trade secrets, and other intellectual property**

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

- No  
 Yes. Give specific information about them....

--	--

27. **Licenses, franchises, and other general intangibles**

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

- No  
 Yes. Give specific information about them....

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28. **Tax refunds owed to you**

- No  
 Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

	Federal:	
	State:	
	Local:	

29. **Family support**

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

No  
 Yes. Give specific information.....

--

Alimony: \_\_\_\_\_  
Maintenance: \_\_\_\_\_  
Support: \_\_\_\_\_  
Divorce settlement: \_\_\_\_\_  
Property settlement: \_\_\_\_\_

**30. Other amounts someone owes you**

*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

No  
 Yes. Give specific information.....

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**31. Interests in insurance policies**

*Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

No  
 Yes. Name the insurance company  
of each policy and list its value....

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

No  
 Yes. Give specific information.....

--

**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

*Examples:* Accidents, employment disputes, insurance claims, or rights to sue

No  
 Yes. Describe each claim.....

--

**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

No  
 Yes. Describe each claim.....

--

**35. Any financial assets you did not already list**

No  
 Yes. Give specific information.....

--

Webber  
Webber

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here..... →

\$208.00

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**

37. Do you own or have any legal or equitable interest in any business-related property?

No. Go to Part 6.  
 Yes. Go to line 38.

38. Accounts receivable or commissions you already earned

No  
 Yes. Describe.....

--	--

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

No  
 Yes. Describe.....

--	--

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

No  
 Yes. Describe.....

--	--

41. Inventory

No  
 Yes. Describe.....

--	--

42. Interests in partnerships or joint ventures

No  
 Yes. Describe.....

Name of entity:

% of ownership:

\_\_\_\_\_ % \_\_\_\_\_

\_\_\_\_\_ % \_\_\_\_\_

\_\_\_\_\_ % \_\_\_\_\_

43. Customer lists, mailing lists, or other compilations

No  
 Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?

No  
 Yes. Describe.....

--	--

**44. Any business-related property you did not already list**

- No
  - Yes. Give specific information.....

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here.....

---

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**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**  
**If you own or have an interest in farmland, list it in Part 1.**

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- No. Go to Part 7.  
 Yes. Go to line 47.

## 47. Farm animals

*Examples:* Livestock, poultry, farm-raised fish

- No  
 Yes.....

**48. Crops—either growing or harvested**

- No
  - Yes. Give specific information.....

**49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade**

- No  
 Yes.....

#### **50. Farm and fishing supplies, chemicals, and feed**

- No  
 Yes.....

## 51. Any farm- and commercial fishing-related property you did not already list

- No
- Yes. Give specific information.....

--	--

## 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here..... →

--

## Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

## 53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

- No
- Yes. Give specific information.....


## 54. Add the dollar value of all of your entries from Part 7. Write that number here..... →

\$0.00
--------

## Part 8: List the Totals of Each Part of this Form

## 55. Part 1: Total real estate, line 2..... →

\$0.00
--------

## 56. Part 2: Total vehicles, line 5

\$7,100.00

## 57. Part 3: Total personal and household items, line 15

\$4,600.00

## 58. Part 4: Total financial assets, line 36

\$208.00

## 59. Part 5: Total business-related property, line 45

\$0.00

## 60. Part 6: Total farm- and fishing-related property, line 52

\$0.00

## 61. Part 7: Total other property not listed, line 54

+ \$0.00

## 62. Total personal property. Add lines 56 through 61.....

\$11,908.00

Copy personal property total →

+ \$11,908.00

## 63. Total of all property on Schedule A/B. Add line 55 + line 62.....

\$11,908.00
-------------

Debtor 1	<b>Robert</b>	<b>Webber</b>	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Patricia</b>	<b>Webber</b>	
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>Northern District of Illinois</b>		
Case number (if known)			

Check if this is an amended filing

## Official Form 106C

### Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

- No  
 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  
 No  
 Yes

First Name Middle Name Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		<i>Check only one box for each exemption.</i>	
<u>1008 Landon Ave, Winthrop Harbor, IL 60096-1734</u>  <u>1008 Landon Ave Winthrop Hbr, IL 60096-1734</u>	<u>unknown</u>	<input checked="" type="checkbox"/> <u>unknown</u> <input type="checkbox"/> <u>100% of fair market value, up to any applicable statutory limit</u>	<u>Ohio Rev. Code Ann. § 2329.66(A)</u> <u>(1)(a)&amp;(b)</u>
<u>Line from Schedule A/B:</u> <u>1.1</u>			
<u>Brief description:</u> <u>2013 Hyundai Elantra 2013 Hyundai Elantra (approx. 105000 miles)</u>	<u>\$7,100.00</u>	<input checked="" type="checkbox"/> <u>\$7,100.00</u> <input type="checkbox"/> <u>100% of fair market value, up to any applicable statutory limit</u>	<u>Ohio Rev. Code Ann. § 2329.66(A)(2)</u>
<u>Line from Schedule A/B:</u> <u>3.1</u>			
<u>Brief description:</u> <u>5 Rooms of furnishings, Newer Couch and Loveseat, one chair, dining and cookware, linens and misc household goods</u>	<u>\$1,500.00</u>	<input checked="" type="checkbox"/> <u>\$600.00</u> <input type="checkbox"/> <u>100% of fair market value, up to any applicable statutory limit</u>	<u>Ohio Rev. Code Ann. § 2329.66(A)</u> <u>(4)(a)</u>
<u>Line from Schedule A/B:</u> <u>6</u>		<input checked="" type="checkbox"/> <u>\$900.00</u> <input type="checkbox"/> <u>100% of fair market value, up to any applicable statutory limit</u>	<u>Ohio Rev. Code Ann. §</u> <u>2329.66(A)(18)</u>
<u>Brief description:</u> <u>1 Smart TV 32inch, 1 regular 36 inch TV, Desk Top Computer, pad, 2 Cell Phones, Lights, Appliances came with the house, smaller appliances</u>	<u>\$1,200.00</u>	<input checked="" type="checkbox"/> <u>\$600.00</u> <input type="checkbox"/> <u>100% of fair market value, up to any applicable statutory limit</u>	<u>Ohio Rev. Code Ann. § 2329.66(A)</u> <u>(4)(a)</u>
<u>Line from Schedule A/B:</u> <u>7</u>		<input checked="" type="checkbox"/> <u>\$600.00</u> <input type="checkbox"/> <u>100% of fair market value, up to any applicable statutory limit</u>	<u>Ohio Rev. Code Ann. §</u> <u>2329.66(A)(18)</u>
<u>Brief description:</u> <u>Normal Clothing</u>	<u>\$400.00</u>	<input checked="" type="checkbox"/> <u>\$400.00</u> <input type="checkbox"/> <u>100% of fair market value, up to any applicable statutory limit</u>	<u>Ohio Rev. Code Ann. § 2329.66(A)</u> <u>(4)(a)</u>
<u>Line from Schedule A/B:</u> <u>11</u>			
<u>Brief description:</u> <u>2 Wedding Rings, 2 Watches, One gold necklace</u>	<u>\$1,500.00</u>	<input checked="" type="checkbox"/> <u>\$1,500.00</u> <input type="checkbox"/> <u>100% of fair market value, up to any applicable statutory limit</u>	<u>Ohio Rev. Code Ann. § 2329.66(A)</u> <u>(4)(b)</u>
<u>Line from Schedule A/B:</u> <u>12</u>			

First Name Middle Name Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim <i>Check only one box for each exemption.</i>	Specific laws that allow exemption
Brief description: Line from Schedule A/B:	Cash 16	<input checked="" type="checkbox"/> \$10.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(3) _____ _____
Brief description: Line from Schedule A/B:	JP Morgan Chase Checking account 17	<input checked="" type="checkbox"/> \$6.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(3) _____ _____
Brief description: Line from Schedule A/B:	Chase Checking account 17	<input checked="" type="checkbox"/> \$50.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(3) _____ _____
Brief description: Line from Schedule A/B:	Chase Savings account 17	<input checked="" type="checkbox"/> \$1.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(3) _____ _____
Brief description: Line from Schedule A/B:	Chase Savings account 17	<input checked="" type="checkbox"/> \$134.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(3) _____ _____
Brief description: Line from Schedule A/B:	Great Lake Credit Union Other financial account 17	<input checked="" type="checkbox"/> \$7.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(3) _____ _____

Debtor 1	<b>Robert</b>	<b>Webber</b>	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Patricia</b>	<b>Webber</b>	
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>Northern District of Illinois</b>		
Case number (if known)			

Check if this is an amended filing

## Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

#### 1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below.

#### Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion of claim If any
---	--	--

2.1	Ally Financial Creditor's Name  Po Box 380901 Number Street  Minneapolis, MN 55438-0901 City State ZIP Code	Describe the property that secures the claim:  _____	\$10,117.00	\$0.00	\$10,117.00
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Nature of lien.</b> Check all that apply.</p> <p><input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan)  <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)  <input type="checkbox"/> Judgment lien from a lawsuit  <input type="checkbox"/> Other (including a right to offset) _____</p>					
<p>Last 4 digits of account number _____</p>					
<p>Add the dollar value of your entries in Column A on this page. Write that number here:</p>			\$10,117.00		

Part 1:	Additional Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Column A <b>Amount of claim</b> Do not deduct the value of collateral.	Column B <b>Value of collateral that supports this claim</b>	Column C <b>Unsecured portion</b> If any	
2.2	Pennymac Loan Services Creditor's Name  27001 Agora Rd Ste 350 Number Street  Agoura Hills, CA 91301 City State ZIP Code	Describe the property that secures the claim:  [Redacted]	\$130,000.00	\$0.00	\$130,000.00
	<b>Who owes the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	<b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
	<b>Check if this claim relates to a community debt</b>	<b>Nature of lien.</b> Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____			
	<b>Date debt was incurred</b> 6/30/2017	<b>Last 4 digits of account number</b> _____			
<b>Remarks:</b> VA Loan no money down					
	<b>Add the dollar value of your entries in Column A on this page. Write that number here:</b>		\$130,000.00		
	<b>If this is the last page of your form, add the dollar value totals from all pages. Write that number here:</b>		\$140,117.00		

Debtor 1	<b>Robert</b>	<b>Webber</b>
	First Name	Middle Name
	Last Name	
Debtor 2 (Spouse, if filing)	<b>Patricia</b>	<b>Webber</b>
	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the:	<b>Northern District of Illinois</b>	
Case number (if known)		

Check if this is an amended filing

## Official Form 106E/F

### Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- No. Go to Part 2.  
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  
 (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total claim	Priority amount	Nonpriority amount

Priority Creditor's Name \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Number Street \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

City State ZIP Code \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

- Domestic support obligations  
 Taxes and certain other debts you owe the government  
 Claims for death or personal injury while you were intoxicated  
 Other. Specify \_\_\_\_\_

Is the claim subject to offset?

- No  
 Yes

Part 2: List All of Your NONPRIORITY Unsecured Claims

**3. Do any creditors have nonpriority unsecured claims against you?**

- No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes.

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.1 **Capital One Bank**  
 Nonpriority Creditor's Name  
**PO Box 85147**  
 Number Street  
**Richmond, VA 23276**  
 City State ZIP Code

**Who incurred the debt? Check one.**

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

Last 4 digits of account number 3114

**Total claim**

\$2,515.00

**When was the debt incurred?** \_\_\_\_\_  
**As of the date you file, the claim is:** Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify

4.2 **Capital One Bank**  
 Nonpriority Creditor's Name  
**PO Box 85147**  
 Number Street  
**Richmond, VA 23276**  
 City State ZIP Code

**Who incurred the debt? Check one.**

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

Last 4 digits of account number 5520

\$1,974.00

**When was the debt incurred?** \_\_\_\_\_  
**As of the date you file, the claim is:** Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify

4.3 **Cb/Elder-Beerman**  
 Nonpriority Creditor's Name  
**PO Box 182789**  
 Number Street  
**Columbus, OH 43218**  
 City State ZIP Code

**Who incurred the debt? Check one.**

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

Last 4 digits of account number 6164

\$2,329.00

**When was the debt incurred?** \_\_\_\_\_  
**As of the date you file, the claim is:** Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Credit Card**

## Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.			Total claim
<b>4.4</b>	<b>Cb/Elder-Beerman</b> Nonpriority Creditor's Name  <b>PO Box 182789</b> Number Street  <b>Columbus, OH 43218</b> City State ZIP Code	Last 4 digits of account number _____  When was the debt incurred? _____  As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,446.00</b>
	<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____	
	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<b>4.5</b>	<b>Chase Bank One Card Services</b> Nonpriority Creditor's Name  <b>PO Box 15298</b> Number Street  <b>Wilmington, DE 19850</b> City State ZIP Code	Last 4 digits of account number <u>4291</u>  When was the debt incurred? _____  As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$6,551.00</b>
	<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____	
	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<b>4.6</b>	<b>Comenity Bank/ Venus Credit</b> Nonpriority Creditor's Name  <b>PO Box 182789</b> Number Street  <b>Columbus, OH 43218</b> City State ZIP Code	Last 4 digits of account number _____  When was the debt incurred? _____  As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$45.00</b>
	<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____ <b>Credit Card</b>	
	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1  
Debtor 2Robert  
Patricia

First Name

Document Page 25 of 80

Case number (if known)

Middle Name

Last Name

## Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.			Total claim
4.7	<b>Credit One Bank</b> Nonpriority Creditor's Name <u>PO Box 98872</u> Number Street <u>Las Vegas, NV 89193</u> City State ZIP Code	Last 4 digits of account number <u>8903</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	<u>\$1,107.00</u>
4.8	<b>Credit One Bank</b> Nonpriority Creditor's Name <u>PO Box 98872</u> Number Street <u>Las Vegas, NV 89193</u> City State ZIP Code	Last 4 digits of account number <u>9634</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	<u>\$1,908.00</u>
4.9	<b>Credit One Bank</b> Nonpriority Creditor's Name <u>PO Box 98872</u> Number Street <u>Las Vegas, NV 89193</u> City State ZIP Code	Last 4 digits of account number <u>1610</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	<u>\$734.00</u>

## Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.			Total claim
4.10	<p><b>Discover Bank</b></p> <p>Nonpriority Creditor's Name <b>PO Box 15316</b> Number Street <b>Wilmington, DE 19850</b> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.  <input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number _____</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify  <b>Credit Card</b></p>	\$1,516.00
4.11	<p><b>Lake Forest Hospital</b></p> <p>Nonpriority Creditor's Name <b>660 N. Westmoreland Rd.</b> Number Street <b>Lake Forest, IL 60045</b> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.  <input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number _____</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify  <b>Medical Debt</b></p>	unknown
4.12	<p><b>Merrick Bank</b></p> <p>Nonpriority Creditor's Name <b>PO Box 5721</b> Number Street <b>Hicksville, NY 11802-5721</b> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.  <input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>3065</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify  <b>Credit Card</b></p>	\$1,222.00

## Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.			Total claim
4.13	<p><b>Merrick Bank</b></p> <p>Nonpriority Creditor's Name</p> <p><b>PO Box 5721</b></p> <p>Number Street</p> <p><b>Hicksville, NY 11802-5721</b></p> <p>City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>5529</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p>	<u>\$2,733.00</u>
4.14	<p><b>Midwest Orthopaedics</b></p> <p>Nonpriority Creditor's Name</p> <p><b>PO Box 2742</b></p> <p>Number Street</p> <p><b>Carol Stream, IL 60132</b></p> <p>City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number _____</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify</p>	<u>unknown</u>
4.15	<p><b>Oak Park Hospital</b></p> <p>Nonpriority Creditor's Name</p> <p><b>P.O.Box 70769</b></p> <p><b>P.O.Box 70769</b></p> <p>Number Street</p> <p><b>Chicago, IL 60673-0769</b></p> <p>City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number _____</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify</p>	<u>unknown</u>

## Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.			Total claim
4.16	<b>Ohio Edison</b> Nonpriority Creditor's Name <u>1910 W Market St # 44313</u> Number Street <u>Akron, OH 44313-6938</u> City State ZIP Code	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Utility</b>	\$140.96
4.17	<b>Ohio State University Wexner Medical Center</b> Nonpriority Creditor's Name <b>Billing</b> <u>410 W 10th Ave</u> Number Street <u>Columbus, OH 43210-1240</u> City State ZIP Code	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Utility</b>	\$1,000.00
4.18	<b>Onemain</b> Nonpriority Creditor's Name  Number Street <u>Evansville, IN 47706</u> City State ZIP Code	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Personal Loan</b>	\$7,126.00

## Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.			Total claim
4.19	<b>Portfolio Recovery</b> Nonpriority Creditor's Name <u>120 Corporate Blvd. Ste. 1</u> Number Street <u>Norfolk, VA 23502</u> City State ZIP Code	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Collecting</b>	\$1,800.00
	<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>Remarks:</b> Capital One from 2008 American Electrical Power 2003		
4.20	<b>Rush Oak Park Hospital/TQSA, Inc.</b> Nonpriority Creditor's Name <u>PO Box 70769</u> Number Street <u>Chicago, IL 60673</u> City State ZIP Code	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Medical Debt</b>	\$1,382.64
	<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1  
Debtor 2Robert  
Patricia

First Name

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Case number (if known)

Middle Name

Last Name

## Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.			Total claim
4.21	<p><b>Shane J. NHO MD</b></p> <p>Nonpriority Creditor's Name <b>1611 W Harrison St,</b> Number Street <b>Chicago, IL 60612</b> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.  <input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number _____</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify _____</p>	<b>unknown</b>
4.22	<p><b>Spectrum Billing Services</b></p> <p>Nonpriority Creditor's Name <b>7333 Tam O'Shanter</b> Number Street <b>Stockton, CA 95210-3300</b> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.  <input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number _____</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify _____</p>	<b>\$213.00</b>
4.23	<p><b>SYNCB/SAMS</b></p> <p>Nonpriority Creditor's Name <b>Po Box 965026</b> Number Street <b>Orlando, FL 32896-5026</b> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.  <input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>5756</b></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p>	<b>\$968.00</b>

Debtor 1  
Debtor 2Robert  
Patricia

First Name

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Case number (if known)

Middle Name

Last Name

## Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.			Total claim
4.24	<b>Syncb/Walmart</b> Nonpriority Creditor's Name <b>PO Box 965026</b> Number Street <b>Orlando, FL 32896</b> City State ZIP Code	Last 4 digits of account number <u>0331</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	\$1,630.00
4.25	<b>Syncb/Walmart</b> Nonpriority Creditor's Name <b>PO Box 965026</b> Number Street <b>Orlando, FL 32896</b> City State ZIP Code	Last 4 digits of account number <u>1652</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	\$1,491.00
4.26	<b>The Home Depot</b> Nonpriority Creditor's Name <b>PO Box 105980 Dept. 51</b> Number Street <b>Atlanta, GA 30353-5980</b> City State ZIP Code	Last 4 digits of account number <u>3238</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	\$1,670.00

Debtor 1  
Debtor 2Robert  
Patricia

First Name

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Case number (if known)

Webber

Middle Name

Last Name

**Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page**

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.			Total claim
4.27	<b>Time Warner Cable</b> Nonpriority Creditor's Name	Last 4 digits of account number _____	<u>unknown</u>
	Po Box 916 Number Street	When was the debt incurred? _____	
	Carol Stream, IL 60132-0916 City                      State                      ZIP Code	As of the date you file, the claim is: Check all that apply.	
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Type of NONPRIORITY unsecured claim:</b>	
		<input type="checkbox"/> Student loans	
		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
		<input checked="" type="checkbox"/> Other. Specify _____	
	<b>Who incurred the debt? Check one.</b>		
	<input type="checkbox"/> Debtor 1 only		
	<input type="checkbox"/> Debtor 2 only		
	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only		
	<input type="checkbox"/> At least one of the debtors and another		
	<input type="checkbox"/> Check if this claim is for a community debt		
	<b>Is the claim subject to offset?</b>		
	<input checked="" type="checkbox"/> No		
	<input type="checkbox"/> Yes		

Debtor 1  
Debtor 2Robert  
Patricia  
First NameDocument Member Page 33 of 80  
Webber  
Middle Name

Case number (if known)

## Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

**One Main**

Name  
**1828 Grand Ave**  
Number Street  
**Waukegan, IL 60085**  
City                          State                          ZIP Code

**On which entry in Part 1 or Part 2 did you list the original creditor?**

Line 4.18 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**Last 4 digits of account number** \_\_\_\_\_

Name  
Number Street  
City                          State                          ZIP Code

**One which entry in Part 1 or Part 2 did you list the original creditor?**

Line \_\_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**Last 4 digits of account number** \_\_\_\_\_

Name  
Number Street  
City                          State                          ZIP Code

**One which entry in Part 1 or Part 2 did you list the original creditor?**

Line \_\_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**Last 4 digits of account number** \_\_\_\_\_

Name  
Number Street  
City                          State                          ZIP Code

**One which entry in Part 1 or Part 2 did you list the original creditor?**

Line \_\_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**Last 4 digits of account number** \_\_\_\_\_

Name  
Number Street  
City                          State                          ZIP Code

**One which entry in Part 1 or Part 2 did you list the original creditor?**

Line \_\_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**Last 4 digits of account number** \_\_\_\_\_

Name  
Number Street  
City                          State                          ZIP Code

**One which entry in Part 1 or Part 2 did you list the original creditor?**

Line \_\_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**Last 4 digits of account number** \_\_\_\_\_

Name  
Number Street  
City                          State                          ZIP Code

**One which entry in Part 1 or Part 2 did you list the original creditor?**

Line \_\_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**Last 4 digits of account number** \_\_\_\_\_

## Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. _____ \$0.00
	6b. Taxes and certain other debts you owe the government	6b. _____ \$0.00
	6c. Claims for death or personal injury while you were intoxicated	6c. _____ \$0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + _____ \$0.00
	6e. Total. Add lines 6a through 6d.	6e. _____ \$0.00

		Total claim
Total claims from Part 2	6f. Student loans	6f. _____ \$0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. _____ \$0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. _____ \$0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + _____ \$41,501.60
	6j. Total. Add lines 6f through 6i.	6j. _____ \$41,501.60

Debtor 1	<b>Robert</b>	<b>Webber</b>	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Patricia</b>	<b>Webber</b>	
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>Northern District of Illinois</b>		
Case number (if known)			

Check if this is an amended filing

## Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

**1. Do you have any executory contracts or unexpired leases?**

- No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

**2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.**

	Person or company with whom you have the contract or lease		State what the contract or lease is for	
2.1	Name _____ Number Street _____ City _____ State _____ ZIP Code _____			
2.2	Name _____ Number Street _____ City _____ State _____ ZIP Code _____			
2.3	Name _____ Number Street _____ City _____ State _____ ZIP Code _____			
2.4	Name _____ Number Street _____ City _____ State _____ ZIP Code _____			
2.5	Name _____ Number Street _____ City _____ State _____ ZIP Code _____			

Debtor 1	<b>Robert</b>	<b>Webber</b>	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Patricia</b>	<b>Webber</b>	
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>Northern District of Illinois</b>		
Case number (if known)			

Check if this is an amended filing

## Official Form 106H

### Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

No  
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.

Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

No

Yes. In which community state or territory did you live? \_\_\_\_\_ Fill in the name and current address of that person.

Name \_\_\_\_\_

Number Street \_\_\_\_\_

City State ZIP Code \_\_\_\_\_

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

**Column 1: Your codebtor**

**Column 2: The creditor to whom you owe the debt**

Check all schedules that apply:

3.1

Name \_\_\_\_\_

Number Street \_\_\_\_\_

City State ZIP Code \_\_\_\_\_

Schedule D, line \_\_\_\_\_

Schedule E/F, line \_\_\_\_\_

Schedule G, line \_\_\_\_\_

Debtor 1	<b>Robert</b>	<b>Webber</b>
First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Patricia</b>	<b>Webber</b>
First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>Northern District of Illinois</b>	
Case number (if known)		

Check if this is:

- An amended filing  
 A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

**Official Form 106I****Schedule I: Your Income**

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Employment****1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

**Employment status****Debtor 1**

- Employed  
 Not Employed

**Debtor 2 or non-filing spouse**

- Employed  
 Not Employed

**Occupation**\_\_\_\_\_  
Lambs Farm**Employer's name**\_\_\_\_\_  
194 & 176  
Number Street**Employer's address**\_\_\_\_\_  
Libertyville, IL 60048

City

State

Zip Code

\_\_\_\_\_  
City

State

Zip Code

**How long employed there?** \_\_\_\_\_**Part 2: Give Details About Monthly Income**

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

**For Debtor 1****For Debtor 2 or  
non-filing spouse**

**2. List monthly gross wages, salary, and commissions (before all payroll deductions.)** If not paid monthly, calculate what the monthly wage would be.

2. \_\_\_\_\_ \$953.33 \_\_\_\_\_ \$0.00

**3. Estimate and list monthly overtime pay.**

3. + \_\_\_\_\_ \$0.00 + \_\_\_\_\_ \$0.00

**4. Calculate gross income.** Add line 2 + line 3.

4. \_\_\_\_\_ \$953.33 \_\_\_\_\_ \$0.00

	For Debtor 1	For Debtor 2 or non-filing spouse
<b>Copy line 4 here.....→</b>	4.      \$953.33	\$0.00
<b>5. List all payroll deductions:</b>		
5a. Tax, Medicare, and Social Security deductions	5a.      \$460.89	\$0.00
5b. Mandatory contributions for retirement plans	5b.      \$0.00	\$0.00
5c. Voluntary contributions for retirement plans	5c.      \$0.00	\$0.00
5d. Required repayments of retirement fund loans	5d.      \$0.00	\$0.00
5e. Insurance	5e.      \$23.83	\$0.00
5f. Domestic support obligations	5f.      \$0.00	\$0.00
5g. Union dues	5g.      \$0.00	\$0.00
5h. Other deductions. Specify: _____	5h. + \$0.00	+ \$0.00
<b>6. Add the payroll deductions.</b> Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6.      \$484.73	\$0.00
<b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.	7.      \$468.61	\$0.00
<b>8. List all other income regularly received:</b>		
8a. Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.      \$0.00	\$0.00
8b. Interest and dividends	8b.      \$0.00	\$0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive  Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.      \$0.00	\$0.00
8d. Unemployment compensation	8d.      \$0.00	\$0.00
8e. Social Security	8e.      \$1,239.41	\$835.00
8f. Other government assistance that you regularly receive  Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: _____	8f.      \$0.00	\$0.00
8g. Pension or retirement income	8g.      \$1,254.00	\$0.00
8h. Other monthly income. Specify: _____	8h. + \$0.00	+ \$0.00
<b>9. Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.      \$2,493.41	\$835.00
<b>10. Calculate monthly income.</b> Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.      \$2,962.02	+ \$835.00 = \$3,797.02
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b>  Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify: _____	11. + \$0.00	
<b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies	12.      \$3,797.02	
		<b>Combined monthly income</b>
<b>13. Do you expect an increase or decrease within the year after you file this form?</b>	<input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: _____	

Debtor 1	<b>Robert</b>	<b>Webber</b>	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Patricia</b>	<b>Webber</b>	
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>Northern District of Illinois</b>		
Case number (if known)			

Check if this is:

 An amended filing A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

**Official Form 106J****Schedule J: Your Expenses**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Your Household****1. Is this a joint case?** No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.**2. Do you have dependents?** NoDo not list Debtor 1 and  
Debtor 2. Yes. Fill out this information for  
each dependent.....

Do not state the dependents' names.

**Dependent's relationship to  
Debtor 1 or Debtor 2**


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**Dependent's  
age**


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- |                              |
|------------------------------|
| <input type="checkbox"/> No  |
| <input type="checkbox"/> Yes |
| <input type="checkbox"/> No  |
| <input type="checkbox"/> Yes |
| <input type="checkbox"/> No  |
| <input type="checkbox"/> Yes |
| <input type="checkbox"/> No  |
| <input type="checkbox"/> Yes |
| <input type="checkbox"/> No  |
| <input type="checkbox"/> Yes |

**3. Do your expenses include expenses  
of people other than yourself and  
your dependents?** No Yes**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

**Your expenses****4. The rental or home ownership expenses for your residence.** Include first mortgage payments and any rent for the ground or lot.

4. \_\_\_\_\_ \$975.00

**If not included in line 4:**

4a. Real estate taxes

4a. \_\_\_\_\_ \$0.00

4b. Property, homeowner's, or renter's insurance

4b. \_\_\_\_\_ \$0.00

4c. Home maintenance, repair, and upkeep expenses

4c. \_\_\_\_\_ \$0.00

4d. Homeowner's association or condominium dues

4d. \_\_\_\_\_ \$0.00

First Name Middle Name Last Name

		<b>Your expenses</b>
<b>5.</b>	<b>Additional mortgage payments for your residence</b> , such as home equity loans	5. _____
<b>6.</b>	<b>Utilities:</b>	
6a.	Electricity, heat, natural gas	6a. _____ \$300.00
6b.	Water, sewer, garbage collection	6b. _____ \$100.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. _____ \$370.00
6d.	Other. Specify: _____	6d. _____ \$0.00
<b>7.</b>	<b>Food and housekeeping supplies</b>	7. _____ \$500.00
<b>8.</b>	<b>Childcare and children's education costs</b>	8. _____ \$0.00
<b>9.</b>	<b>Clothing, laundry, and dry cleaning</b>	9. _____ \$75.00
<b>10.</b>	<b>Personal care products and services</b>	10. _____ \$50.00
<b>11.</b>	<b>Medical and dental expenses</b>	11. _____ \$150.00
<b>12.</b>	<b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12. _____ \$300.00
<b>13.</b>	<b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13. _____ \$50.00
<b>14.</b>	<b>Charitable contributions and religious donations</b>	14. _____ \$0.00
<b>15.</b>	<b>Insurance.</b>  Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a.	Life insurance	15a. _____ \$0.00
15b.	Health insurance	15b. _____ \$281.00
15c.	Vehicle insurance	15c. _____ \$100.00
15d.	Other insurance. Specify: _____	15d. _____ \$0.00
<b>16.</b>	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. _____ \$0.00
<b>17.</b>	<b>Installment or lease payments:</b>	
17a.	Car payments for Vehicle 1	17a. _____ \$535.00
17b.	Car payments for Vehicle 2	17b. _____
17c.	Other. Specify: _____	17c. _____
17d.	Other. Specify: _____	17d. _____
<b>18.</b>	<b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>	18. _____ \$0.00
<b>19.</b>	<b>Other payments you make to support others who do not live with you.</b> Specify: _____	19. _____ \$0.00
<b>20.</b>	<b>Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>	
20a.	Mortgages on other property	20a. _____ \$0.00
20b.	Real estate taxes	20b. _____ \$0.00
20c.	Property, homeowner's, or renter's insurance	20c. _____ \$0.00
20d.	Maintenance, repair, and upkeep expenses	20d. _____ \$45.00
20e.	Homeowner's association or condominium dues	20e. _____ \$0.00

First Name Middle Name Last Name

21. Other. Specify: \_\_\_\_\_

21. + \$0.00

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22a. \$3,831.00

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. \$0.00

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \$3,831.00

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23a. \$3,797.02

23b. Copy your monthly expenses from line 22c above.

23b. - \$3,831.00

23c. Subtract your monthly expenses from your monthly income.

The result is your *monthly net income*.

23c. (\$33.98)

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

None

Yes.

Itemized Expenses

Household:

Debtor 1	<b>Robert</b>	<b>Webber</b>	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Patricia</b>	<b>Webber</b>	
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>Northern District of Illinois</b>		
Case number (if known)			

Check if this is an amended filing

## Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new **Summary** and check the box at the top of this page.

#### Part 1: Summarize Your Assets

##### Your assets

Value of what you own

##### 1. Schedule A/B: Property (Official Form 106A/B)

1a. Copy line 55, Total real estate, from <i>Schedule A/B</i> .....	\$0.00
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i> .....	\$11,908.00
1c. Copy line 63, Total of all property on <i>Schedule A/B</i> .....	\$11,908.00

#### Part 2: Summarize Your Liabilities

##### Your liabilities

Amount you owe

##### 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)

2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> .....	\$140,117.00
---	--------------

##### 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i> .....	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> .....	+ \$41,501.60

##### Your total liabilities

\$181,618.60

#### Part 3: Summarize Your Income and Expenses

##### 4. Schedule I: Your Income (Official Form 106I)

Copy your combined monthly income from line 12 of <i>Schedule I</i> .....	\$3,797.02
---	------------

##### 5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22c of <i>Schedule J</i> .....	\$3,831.00
---	------------

**Part 4: Answer These Questions for Administrative and Statistical Records****6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- Yes

**7. What kind of debt do you have?**

- Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

**8. From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$2,207.33

**9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:****Total claim****From Part 4 on Schedule E/F, copy the following:**9a. Domestic support obligations (Copy line 6a.) \$0.009b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.009c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.009d. Student loans. (Copy line 6f.) \$0.009e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.009f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) + \$0.009g. **Total.** Add lines 9a through 9f. \$0.00

Debtor 1	<b>Robert</b>	<b>Webber</b>
	First Name	Middle Name
	Last Name	
Debtor 2 (Spouse, if filing)	<b>Patricia</b>	<b>Webber</b>
	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the:	<b>Northern District of Illinois</b>	
Case number (if known)		

Check if this is an amended filing

## Official Form 106Dec

### Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

#### Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person \_\_\_\_\_ Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)*.

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Robert Webber  
Robert Webber, Debtor 1, Debtor 1

Date 07/03/2018  
MM/ DD/ YYYY

X /s/ Patricia Webber  
Patricia Webber, Debtor 2

Date 07/03/2018  
MM/ DD/ YYYY

Debtor 1	<b>Robert</b>	<b>Webber</b>	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Patricia</b>	<b>Webber</b>	
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>Northern District of Illinois</b>		
Case number (if known)			

Check if this is an amended filing

## Official Form 107

### Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Give Details About Your Marital Status and Where You Lived Before

##### 1. What is your current marital status?

- Married  
 Not married

##### 2. During the last 3 years, have you lived anywhere other than where you live now?

- No  
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
390 James Way E Number Street	From Jul 23, 2010 To Jul 06, 2017	<input checked="" type="checkbox"/> Same as Debtor 1	<input checked="" type="checkbox"/> Same as Debtor 1 From _____ To _____
, 43302 City State ZIP Code	Number Street	City	State ZIP Code
From _____ Number Street To _____	<input type="checkbox"/> Same as Debtor 1	From _____ Number Street To _____	<input type="checkbox"/> Same as Debtor 1
City State ZIP Code	City	State ZIP Code	

##### 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- No  
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

**Part 2: Explain the Sources of Your Income****4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

 No Yes. Fill in the details.**From January 1 of current year until the date you filed for bankruptcy:****For last calendar year:**(January 1 to December 31, 2017)  
YYYY**For the calendar year before that:**(January 1 to December 31, 2016)  
YYYY

Debtor 1		Debtor 2	
Sources of income	Gross Income (before deductions and exclusions)	Sources of income	Gross Income (before deductions and exclusions)
<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips	\$5,300.00	<input type="checkbox"/> Wages, commissions, bonuses, tips	
<input type="checkbox"/> Operating a business		<input type="checkbox"/> Operating a business	
<input type="checkbox"/> Wages, commissions, bonuses, tips		<input type="checkbox"/> Wages, commissions, bonuses, tips	
<input type="checkbox"/> Operating a business		<input type="checkbox"/> Operating a business	
<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips	\$5,100.00	<input type="checkbox"/> Wages, commissions, bonuses, tips	
<input type="checkbox"/> Operating a business		<input type="checkbox"/> Operating a business	

**5. Did you receive any other income during this year or the two previous calendar years?**Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

 No Yes. Fill in the details.**From January 1 of current year until the date you filed for bankruptcy:****For last calendar year:**(January 1 to December 31, 2017)  
YYYY**For the calendar year before that:**(January 1 to December 31, 2016)  
YYYY

Debtor 1		Debtor 2	
Sources of income	Gross income from each source (before deductions and exclusions)	Sources of income	Gross Income from each source (before deductions and exclusions)
SS	\$7,436.50	SS	\$5,010.00
Pension	\$7,524.00		
SS	\$14,873.00	SS	\$10,020.00
Pension	\$72,579.00		
ss	\$14,873.00	ss	\$10,020.00

**Part 3: List Certain Payments You Made Before You Filed for Bankruptcy****6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
Pennymac Loan Services Creditor's Name	Apr 01, 2018	\$2,925.00	\$130,000.00
27001 Agora Rd Ste 350 Number Street	May 01, 2018		<input checked="" type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other
Agoura Hills, CA 91301 City                State                ZIP Code	Jun 01, 2018		
Ally Financial Creditor's Name	Apr 01, 2018	\$1,602.00	\$10,117.00
Po Box 380901 Number Street	May 01, 2018		<input type="checkbox"/> Mortgage <input checked="" type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other
Minneapolis, MN 55438-0901 City                State                ZIP Code	Jun 01, 2018		

**7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

No

Yes. List all payments to an insider.

Dates of payment	Total amount paid	Amount you still owe	Reason for this payment

Insider's Name \_\_\_\_\_

Number Street  
\_\_\_\_\_

City State ZIP Code

Insider's Name \_\_\_\_\_

Number Street  
\_\_\_\_\_

City State ZIP Code

**8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**  
Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider.

Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
------------------	-------------------	----------------------	--

Insider's Name \_\_\_\_\_

Number Street  
\_\_\_\_\_

City State ZIP Code

Insider's Name \_\_\_\_\_

Number Street  
\_\_\_\_\_

City State ZIP Code

**Part 4: Identify Legal Actions, Repossessions, and Foreclosures**

**9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

No

Yes. Fill in the details.

Nature of the case	Court or agency	Status of the case
Case title _____ _____	Court Name _____	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number _____	Number Street _____	
Case title _____ _____	City _____ State _____ ZIP Code _____	
Case number _____	Number Street _____	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case title _____ _____	City _____ State _____ ZIP Code _____	

**10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**

Check all that apply and fill in the details below.

No. Go to line 11.

Yes. Fill in the information below.

Describe the property	Date	Value of the property
Creditor's Name _____	_____	_____
Number Street _____	Explain what happened	
City _____ State _____ ZIP Code _____	<input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.	
Describe the property	Date	Value of the property
Creditor's Name _____	_____	_____
Number Street _____	Explain what happened	
City _____ State _____ ZIP Code _____	<input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.	

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

No

Yes. Fill in the details.

Describe the action the creditor took	Date action was taken	Amount taken
Creditor's Name		
Number Street		
City	State	ZIP Code
Last 4 digits of account number: XXXX-_____		

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No

Yes

#### Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

No

Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value of the gifts
Person to Whom You Gave the Gift			
Number Street			
City	State	ZIP Code	
Person's relationship to you _____			

Robert

Patricia

First Name

Webber

Webber

Middle Name

Webber

Webber

Last Name

Case number (if known)

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift			
Number Street			
City	State ZIP Code		
Person's relationship to you _____			

**14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?** No Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
Charity's Name			
Number Street			
City	State ZIP Code		

**Part 6: List Certain Losses****15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?** No Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss	Date of your loss	Value of property lost
Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.			

**Part 7: List Certain Payments or Transfers****16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?**

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

 No Yes. Fill in the details.

Robert J. Adams & Associates

Person Who Was Paid

111 N. County

Number Street

Waukegan, IL 60085

City State ZIP Code

tinaadams.rja@gmail.com

Email or website address

Person Who Made the Payment, if Not You

**Description and value of any property transferred****Date payment or transfer was made****Amount of payment**Jul 03, 2018

\$0.00

Robert J. Adams & Associates

Person Who Was Paid

111 N. County

Number Street

Waukegan, IL 60085

City State ZIP Code

tinaadams.rja@gmail.com

Email or website address

Person Who Made the Payment, if Not You

**Description and value of any property transferred****Date payment or transfer was made****Amount of payment**Jun 29, 2018

\$0.00

- 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?**

Do not include any payment or transfer that you listed on line 16.

 No Yes. Fill in the details.**Description and value of any property transferred****Date payment or transfer was made****Amount of payment**

Person Who Was Paid

Number Street

City State ZIP Code

- 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?**

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).

Do not include gifts and transfers that you have already listed on this statement.

 No Yes. Fill in the details.

First Name Middle Name Last Name

	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person Who Received Transfer			
Number Street			
City State ZIP Code			
Person's relationship to you _____			
Person Who Received Transfer			
Number Street			
City State ZIP Code			
Person's relationship to you _____			

**19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)**

No

Yes. Fill in the details.

	Description and value of the property transferred	Date transfer was made
Name of trust _____		
_____		

#### Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

**20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?**

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No

Yes. Fill in the details.

	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Name of Financial Institution	XXXX- _____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	_____
Number Street				
City State ZIP Code				

Name of Financial Institution

XXXX- \_\_\_\_\_

 Checking Savings Money market Brokerage Other \_\_\_\_\_

Number Street

City State ZIP Code

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

 No Yes. Fill in the details.

Who else had access to it?	Describe the contents	Do you still have it?
Name of Financial Institution	Name	<input type="checkbox"/> No <input type="checkbox"/> Yes
Number Street	Number Street	
City State ZIP Code		

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

 No Yes. Fill in the details.

Who else has or had access to it?	Describe the contents	Do you still have it?
Name of Storage Facility	Name	<input type="checkbox"/> No <input type="checkbox"/> Yes
Number Street	Number Street	
City State ZIP Code		

## Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

 No Yes. Fill in the details.

Where is the property?      Describe the property      Value

Owner's Name	Number	Street	
Number	Street		
		City	State ZIP Code
City	State	ZIP Code	

--

**Part 10: Give Details About Environmental Information**

For the purpose of Part 10, the following definitions apply:

- *Environmental law* means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- *Site* means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- *Hazardous material* means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

**24.** Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

No

Yes. Fill in the details.

Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit	
Number Street	Number Street	
	City State ZIP Code	
City	State ZIP Code	

**25.** Have you notified any governmental unit of any release of hazardous material?

No

Yes. Fill in the details.

Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit	
Number Street	Number Street	
	City State ZIP Code	
City	State ZIP Code	

**26.** Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No

Yes. Fill in the details.

Court or agency	Nature of the case	Status of the case
-----------------	--------------------	--------------------

Case title	Court Name	<input type="checkbox"/> Pending
		<input type="checkbox"/> On appeal
		<input type="checkbox"/> Concluded
Number	Street	
Case number	City	State ZIP Code

**Part 11: Give Details About Your Business or Connections to Any Business**

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- A member of a limited liability company (LLC) or limited liability partnership (LLP)
- A partner in a partnership
- An officer, director, or managing executive of a corporation
- An owner of at least 5% of the voting or equity securities of a corporation

No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

Name	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Number Street		EIN: _____
City State ZIP Code	Name of accountant or bookkeeper	Dates business existed
		From _____ To _____
Name	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Number Street		EIN: _____
City State ZIP Code	Name of accountant or bookkeeper	Dates business existed
		From _____ To _____
Name	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Number Street		EIN: _____
City State ZIP Code	Name of accountant or bookkeeper	Dates business existed
		From _____ To _____

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

No

Yes. Fill in the details below.

Date issued

Name \_\_\_\_\_ MM / DD / YYYY

Number Street \_\_\_\_\_

City State ZIP Code \_\_\_\_\_

**Part 12:** Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**X** \_\_\_\_\_ /s/ Robert Webber  
 Signature of Robert Webber, Debtor 1

**X** \_\_\_\_\_ /s/ Patricia Webber  
 Signature of Patricia Webber, Debtor 2

Date 07/03/2018Date 07/03/2018**Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?**

- No  
 Yes

**Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?**

- No  
 Yes. Name of person \_\_\_\_\_.

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Debtor 1	<b>Robert</b>	<b>Webber</b>
	First Name	Middle Name
	Last Name	
Debtor 2 (Spouse, if filing)	<b>Patricia</b>	<b>Webber</b>
	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the:	<b>Northern District of Illinois</b>	
Case number (if known)		

Check if this is an amended filing

## Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

##### 1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: <b>Pennymac Loan Services</b>	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input checked="" type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: _____	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Description of property securing debt:		
Creditor's name: <b>Ally Financial</b>	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input checked="" type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: _____	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Description of property securing debt:		

## Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in **Schedule G: Executory Contracts and Unexpired Leases** (Official Form 106G), fill in the information below. Do not list real estate leases. **Unexpired leases** are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

**Part 3: Sign Below**

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X \_\_\_\_\_ /s/ Robert Webber  
Signature of Debtor 1

X \_\_\_\_\_ /s/ Patricia Webber  
Signature of Debtor 2

Date 07/03/2018  
MM/ DD/ YYYY

United States Bankruptcy Court  
Northern District of Illinois

In re Webber, Robert  
Webber, Patricia  
Debtor(s)

Case No. \_\_\_\_\_  
Chapter 7 \_\_\_\_\_

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

1. Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

**FLAT FEE**

For legal services, I have agreed to accept ..... \$1,400.00

Prior to the filing of this statement I have received .....

Balance Due ..... \$335.00

**RETAINER**

For legal services, I have agreed to accept and received a retainer of .....

The undersigned shall bill against the retainer at an hourly rate of .....

[Or attach firm hourly rate schedule.] Debtor(s) have agreed to pay all Court approved fees and expenses exceeding the amount of the retainer.

2. \$335.00 of the filing fee has been paid.

3. The source of the compensation to be paid to me was:

Debtor

Other (specify)

4. The source of compensation to be paid to me is:

Debtor

Other (specify)

5.  I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor' s financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**  
(Continuation Sheet)

- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
  - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
7. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

07/03/2018  
*Date*

/s/ Tina Adams  
*Signature of Attorney*

Robert J. Adams & Associates  
*Name of law firm*

IN RE: **Webber, Robert**  
**Webber, Patricia**

CASE NO

CHAPTER 7

**VERIFICATION OF CREDITOR MATRIX**

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 07/03/2018 Signature /s/ Robert Webber  
Robert Webber, Debtor

Date 07/03/2018 Signature /s/ Patricia Webber  
Patricia Webber, Joint Debtor

Ally Financial  
Po Box 380901  
Minneapolis, MN 55438-0901

Capital One Bank  
PO Box 85147  
Richmond, VA 23276

Cb/Elder-Beerman  
PO Box 182789  
Columbus, OH 43218

Chase Bank One Card  
Services  
PO Box 15298  
Wilmington, DE 19850

Comenity Bank/ Venus Credit  
PO Box 182789  
Columbus, OH 43218

Credit One Bank  
PO Box 98872  
Las Vegas, NV 89193

Discover Bank  
PO Box 15316  
Wilmington, DE 19850

Lake Forest Hospital  
660 N. Westmoreland Rd.  
Lake Forest, IL 60045

Merrick Bank  
PO Box 5721  
Hicksville, NY 11802-5721

Midwest Orthopaedics  
PO Box 2742  
Carol Stream, IL 60132

Oak Park Hospital  
P.O.Box 70769  
P.O.Box 70769  
Chicago, IL 60673-0769

Ohio Edison  
1910 W Market St # 44313  
Akron, OH 44313-6938

Ohio State University Wexner  
Medical Center  
Billing  
410 W 10th Ave  
Columbus, OH 43210-1240

One Main  
1828 Grand Ave  
Waukegan, IL 60085

Onemain  
Evansville, IN 47706

Pennymac Loan Services  
27001 Agora Rd Ste 350  
Agoura Hills, CA 91301

Portfolio Recovery  
120 Corporate Blvd. Ste. 1  
Norfolk, VA 23502

Rush Oak Park  
Hospital/TQSA, Inc.  
PO Box 70769  
Chicago, IL 60673

Shane J. NHO MD  
1611 W Harrison St.  
Chicago, IL 60612

Spectrum Billing Services  
7333 Tam O'Shanter  
Stockton, CA 95210-3300

SYNCB/SAMS  
Po Box 965026  
Orlando, FL 32896-5026

Syncb/Walmart  
PO Box 965026  
Orlando, FL 32896

The Home Depot  
PO Box 105980 Dept. 51  
Atlanta, GA 30353-5980

Time Warner Cable  
Po Box 916  
Carol Stream, IL 60132-0916

Debtor 1 Robert G Webber  
Debtor 2 Patricia A Webber

Case number (if known) \_\_\_\_\_

**Part 7: Sign Below**

**For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

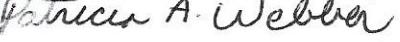
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

  
**X /s/ Robert G Webber**  
Robert G Webber, Debtor 1

Executed on 06/29/2018  
MM / DD / YYYY

  
**X /s/ Patricia A Webber**  
Patricia A Webber, Debtor 2

Executed on 06/29/2018  
MM / DD / YYYY

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.



**X** /s/ Robert G Webber

Robert G Webber, Debtor 1

Date 6/29/2018

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

**X** /s/ Patricia A Webber

Patricia A Webber, Debtor 2

Date 6/29/2018

MM / DD / YYYY

**Fill in this information to identify your case:**

Debtor 1	<b>Robert</b> First Name	<b>G</b> Middle Name	<b>Webber</b> Last Name
Debtor 2 (Spouse, if filing)	<b>Patricia</b> First Name	<b>A</b> Middle Name	<b>Webber</b> Last Name
United States Bankruptcy Court for the: <b>NORTHERN DISTRICT OF ILLINOIS</b>			
Case number (if known) _____		<input type="checkbox"/> Check if this is an amended filing	

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**Sign Below**

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person \_\_\_\_\_

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Robert G Webber

Robert G Webber, Debtor 1

Date 06/29/2018

MM / DD / YYYY

*Patricia A. Webber*

X /s/ Patricia A Webber

Patricia A Webber, Debtor 2

Date 06/29/2018

MM / DD / YYYY

Debtor 1 Robert G Webber  
Debtor 2 Patricia A Webber

Case number (if known) \_\_\_\_\_

**Part 11: Give Details About Your Business or Connections to Any Business**

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- A member of a limited liability company (LLC) or limited liability partnership (LLP)
- A partner in a partnership
- An officer, director, or managing executive of a corporation
- An owner of at least 5% of the voting or equity securities of a corporation

- No. None of the above applies. Go to Part 12.  
 Yes. Check all that apply above and fill in the details below for each business.

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- No  
 Yes. Fill in the details below.

**Part 12: Sign Below**

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ Robert G Webber

Robert G Webber, Debtor 1

Date 06/29/2018

X /s/ Patricia A Webber

Patricia A Webber, Debtor 2

Date 06/29/2018

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- No  
 Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- No  
 Yes. Name of person \_\_\_\_\_

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

06/29/2018 10:51:49am

Debtor 1 Robert G Webber  
Debtor 2 Patricia A Webber

Case number (if known) \_\_\_\_\_

**Part 2: List Your Unexpired Personal Property Leases**

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will this lease be assumed?

None.

**Part 3: Sign Below**

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and personal property that is subject to an unexpired lease.

/s/ Robert G Webber  
Robert G Webber, Debtor 1

/s/ Patricia A Webber  
Patricia A Webber, Debtor 2

Date 06/29/2018  
MM / DD / YYYY

Date 06/29/2018  
MM / DD / YYYY

CHAPTER 7

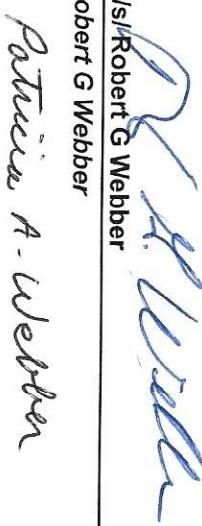
**VERIFICATION OF CREDITOR MATRIX**

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 6/29/2018

Signature /s/ Robert G Webber

Robert G Webber



Signature /s/ Patricia A Webber

Patricia A. Webber

Date 6/29/2018

Signature /s/ Patricia A Webber

Patricia A Webber

06/29/2018 10:51:50am

Debtor 1 **Robert G Webber**  
Debtor 2 **Patricia A Webber**

Case number (if known) \_\_\_\_\_

**Part 2: Determine Whether the Means Test Applies to You**

**12. Calculate your current monthly income for the year.** Follow these steps:

12a. Copy your total current monthly income from line 11.....**Copy line 11 here →** 12a. **\$1,534.75**

Multiply by 12 (the number of months in a year).

**X 12**

12b. The result is your annual income for this part of the form.

12b. **\$18,417.00**

**13. Calculate the median family income that applies to you.** Follow these steps:

Fill in the state in which you live.

**Illinois**

Fill in the number of people in your household.

**2**

Fill in the median family income for your state and size of household..... 13. **\$68,687.00**

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

**14. How do the lines compare?**

- 14a.  Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse*.  
Go to Part 3.  
14b.  Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2*.  
Go to Part 3 and fill out Form 122A-2.

**Part 3: Sign Below**

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

**X /s/ Robert G Webber**

Robert G Webber, Debtor 1

*Robert G. Webber*

**X /s/ Patricia A Webber**

Patricia A Webber, Debtor 2

Date **6/29/2018**

MM / DD / YYYY

Date **6/29/2018**

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

06/29/2018 10:51:42am

Debtor 1 Robert G Webber  
Debtor 2 Patricia A Webber

Case number (if known) \_\_\_\_\_

**Part 7: Sign Below**

**For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

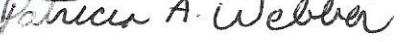
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

  
**X /s/ Robert G Webber**  
Robert G Webber, Debtor 1

Executed on 06/29/2018  
MM / DD / YYYY

  
**X /s/ Patricia A Webber**  
Patricia A Webber, Debtor 2

Executed on 06/29/2018  
MM / DD / YYYY

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.



**X** /s/ Robert G Webber

Robert G Webber, Debtor 1

Date 6/29/2018

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

**X** /s/ Patricia A Webber

Patricia A Webber, Debtor 2

Date 6/29/2018

MM / DD / YYYY

**Fill in this information to identify your case:**

Debtor 1	<b>Robert</b> First Name	<b>G</b> Middle Name	<b>Webber</b> Last Name
Debtor 2 (Spouse, if filing)	<b>Patricia</b> First Name	<b>A</b> Middle Name	<b>Webber</b> Last Name
United States Bankruptcy Court for the: <b>NORTHERN DISTRICT OF ILLINOIS</b>			
Case number (if known) _____		<input type="checkbox"/> Check if this is an amended filing	

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**Sign Below**

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person \_\_\_\_\_

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Robert G Webber

Robert G Webber, Debtor 1

Date 06/29/2018

MM / DD / YYYY

*Patricia A. Webber*

X /s/ Patricia A Webber

Patricia A Webber, Debtor 2

Date 06/29/2018

MM / DD / YYYY

Debtor 1 Robert G Webber  
Debtor 2 Patricia A Webber

Case number (if known) \_\_\_\_\_

**Part 11: Give Details About Your Business or Connections to Any Business**

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- A member of a limited liability company (LLC) or limited liability partnership (LLP)
- A partner in a partnership
- An officer, director, or managing executive of a corporation
- An owner of at least 5% of the voting or equity securities of a corporation

- No. None of the above applies. Go to Part 12.  
 Yes. Check all that apply above and fill in the details below for each business.

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- No  
 Yes. Fill in the details below.

**Part 12: Sign Below**

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ Robert G Webber

Robert G Webber, Debtor 1

Date 06/29/2018

X /s/ Patricia A Webber

Patricia A Webber, Debtor 2

Date 06/29/2018

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- No  
 Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- No  
 Yes. Name of person \_\_\_\_\_

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

06/29/2018 10:51:49am

Debtor 1 Robert G Webber  
Debtor 2 Patricia A Webber

Case number (if known) \_\_\_\_\_

**Part 2: List Your Unexpired Personal Property Leases**

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will this lease be assumed?

None.

**Part 3: Sign Below**

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and personal property that is subject to an unexpired lease.

/s/ Robert G Webber  
Robert G Webber, Debtor 1

/s/ Patricia A Webber  
Patricia A Webber, Debtor 2

Date 06/29/2018  
MM / DD / YYYY

Date 06/29/2018  
MM / DD / YYYY

CHAPTER 7

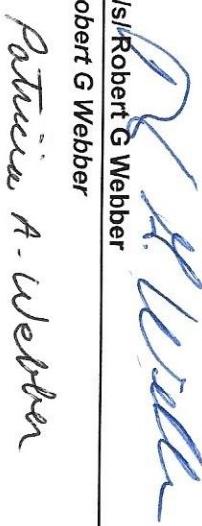
**VERIFICATION OF CREDITOR MATRIX**

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 6/29/2018

Signature /s/ Robert G Webber

Robert G Webber



Signature /s/ Patricia A Webber

Patricia A. Webber

Date 6/29/2018

Signature /s/ Patricia A Webber

Patricia A Webber

06/29/2018 10:51:50am

Debtor 1 **Robert G Webber**  
Debtor 2 **Patricia A Webber**

Case number (if known) \_\_\_\_\_

**Part 2: Determine Whether the Means Test Applies to You**

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**Illinois**

Fill in the number of people in your household.

**2**

Fill in the median family income for your state and size of household..... 13. **\$68,687.00**

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Go to Part 3.  
14b.  Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2*.  
Go to Part 3 and fill out Form 122A-2.

**Part 3: Sign Below**

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

**X /s/ Robert G Webber**

Robert G Webber, Debtor 1

*Robert G. Webber*

**X /s/ Patricia A Webber**

Patricia A Webber, Debtor 2

Date **6/29/2018**

MM / DD / YYYY

Date **6/29/2018**

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.